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Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number. Application or Doctor Number PATENT APPLICATION FEE DETERMINATION RECORD 2000 Substitute for Form PTO-875 OTHER THAN CLAIMS AS FILED - PART I OR SMALL ENTITY SMALL ENTITY (Column 2) (Column 1) RATE FEE FEE NUMBER EXTRA RATE NUMBER FILED FOR 295 BASIC FEE OR (37 CFR 1.16(a)) TOTAL CLAIMS x :25= OR minus 20 = (37 CFR 1.16(c)) INDEPENDENT CLAMS OR (37 CFR 1.16(b)) minus 3 OR MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(d)) TOTAL OR TOTAL * If the difference in column 1 is less than zero, enter *0* in column 2. CLAIMS AS AMENDED - PART II OTHER THAN OR SMALL ENTITY SMALL ENTITY (Column 3) (Column 2) (Column 1) HIGHEST CLAIMS ADDI-RATE PRESENT ADDI-Þ RATE REMAINING NUMBER TIONAL TIONAL **EXTRA** ENT PREVIOUSLY PAID FOR AFTER FEE FEE AMENDMENT **F**(10) NDME Total Minus d 5 OR (37 CFR 1.16(c)) 300Minus × ,100. Independent (37 CFR 1.16(b)) O OR W +180 OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) TOTAL TOTAL OR-ADO'L FEE ADD'L FEE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS ADDI-RATE PRESENT RATE ADDI- ω NUMBER REMAINING TIONAL-TIONAL **EXTRA** PREVIOUSLY IENT **AFTER** FEE FEE PAID FOR AMENDMENT Minus NDM Total (37 CFR 1.16(c)) OR Minus Independent (37 CFR 1,16(b)) OR ũ ξ OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) TOTAL TOTAL ADO'L FEE OR ADD'L FFE (Column 2) (Column 3) (Column 1) HIGHEST CLAIMS RATE ADDI-PRESENT ADDI-RATE NUMBER \circ REMAINING TIONAL FEE TIONAL **EXTRA** ENT **PREVIOUSLY** AFTER FEE AMENDMENT PAID FOR Total (37 CFR 1,16(c)) Minus ENDM OR Independent (37 CFR 1,16(b)) Minus OR OR FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d)) TOTAL TOTAL ADD'L FEE OR ADD'L FEE • If the entry in column 1 is less than the entry in column 2, write "0" in column 3, "If the "Highest Number Previously Paid For IN THIS SPACE is less than 20, enter "20".

"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter 20.
"If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".

The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.

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This collection of information is required by 37 CFR 1.16. The information is required to obtain or retain a benefit by the public which is to fite (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark, Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450, DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.